STATEMENT OF ORGANIZATION		OFFICE USE ONLY	
1. Name and Address of Committee  Keep the French Quarter SAFE PAC  605 CANAL St.  NEW ORLEANS, LA 70130	2. Date of this Statement  10 9 - 15  3. Estimated Membership	PAC 5/0 10/16	15008033
Check If: New Committee	Amended Statement?     Yes No	#89560 #Tooo	<b></b>
5. All Committee Officers and Directors (including Chairperson, Treasure a. Name b. Position Chairperson Treasurer		officers and directors)  St. New ORlean, LA 701	30
Affiliated Organizations     (Any organization, other than a political committee, which directly or in     a. Name     b. Address	directly established, administers,	or financially supports this committee.) c. Relationship to Committee	
7. All Depositories for Committee Funds (committee funds must be depofunds.)  a. Name b. Address  ALD BAR  New OR L  8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Che	FAMS, LA 70112		tual
Committee	eck one: Principal Can	paign Committee Subsidiary	
b. Name of Candidate		c. Office Sought by the Candidate	www.mandoon
9. a. Name of Person Preparing Report MARY C. HoF b. Daytime Telephone 225-275-1984	Frankel		
10. WE HEREBY CERTIFY that the Information contained in this STATEM and belief.  This	Da	ytime Telephone Number	(T)
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